





30 ROCKEFELLER PLAZA 44TH FLOOR NEW YORK, NEW YORK 10112-4498 212.705.5000 FAX 212.705.5020 AUSTIN
BAKU
DALLAS
HOUSTON
LONDON
MOSCOW
NEW YORK
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Appln. Trans. PATENT

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. <u>A32894-072797.0127</u>

First Named Inventor ROBERT BEACH

Express Mail Label No. <u>EJ594513708US</u>

Total Pages ____

09/528697

March 17, 2000

BY EXPRESS MAIL - Label No. EJ594513708US

Assistant Commissioner for Patents Box Patent Application Washington, DC 20231

Sir:

Enclosed herewith for filing is a patent application of ROBERT BEACH entitled IMPROVED WIRELESS
LOCAL AREA NETWORKS

[X] Specification	34 Total Pages
[X] Claims	16 Total Pages
[X] Abstract	1 Total Pages
[X] Drawing(s)	6 Total Sheets
$\underline{\mathbf{X}}$ formal	
_ informal	

[]	Combined Declaration and Power of Attorney	Total Pag	es

[] Newly executed (original or copy)

[] Copy from a prior application

of copending application Serial No. _ filed _."

(for continuation/divisional only - must be filed to avoid surcharge for late filing)

If a continuing application, check appropriate box:

[] Continua of prior a	tion [] Divi	sional	[] Continuation-In-Part (C	IP)
Amend the sp	ecification by insert	ing, before the fi	rst line, the following sentenc	e:
"This is a	[] continuation	[] divisional	[] continuation-in-part	

NY02:253085.1

-1-

Attorney Docket No. <u>A32894-072797.0127</u>

	[X]	An Assignment of the invention to	SYMBOL TECHNOLOGIES INC.
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- [] is attached. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.
- [X] will follow.
- [] has been filed in the prior application
- [] Small Entity Statement(s)
 - [] Small Entity Statement filed in prior application. Status still proper and desired.
- [] Information Disclosure Statement (IDS) PTO-1449
 - [] Copies of IDS Citations.
- [] Preliminary Amendment
- [X] Return Receipt Postcard
- [] Other _
- [] Cancel in this application original claims _ of the prior application before calculating the filing fee.

The filing fee has been calculated as shown below:

	(Col. 1)			(Col. 2)	Small Entity	,		Other Than A Small Entity	
<u>FOR</u>	No.Filed			No. Extra	Rate	<u>Fee</u>	OR	Rate	<u>Fee</u>
Basic Fee									\$690
Total Claims	59	-20	=	39	x \$9 =	\$0		x \$18 =	\$702
Ind. Claims	16	-3	=	13	x \$39 =	\$0		x \$78 =	\$1,014
Multiple Dependent Claim					+ \$130 =	\$0		+\$260 =	
					Total	-			\$2,406

* If the difference in Col. 1 is less than zero, enter "0" in Col. 2. Fee Payment Being Made:

[X] Enclosed

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\$ 2,406.00

Recording Assignment [\$40.00; 37 CFR 1.21(h)]

Total Fees Enclosed

\$ 2,406.00

[X] A check in the amount of \$2,406.00 to cover filing fee is enclosed.

Attorney Docket No. <u>A32894-072797.0127</u>

Prio	prity
[]	Priority of application Country _, Appln. No filed _ is claimed under 35 U.S.C. 119.
[]	Certified Copy of Priority Document(s) Country _, Appln No, filed
	[] is/are attached [] will follow [] has been filed in the parent application S/N
[X]	The Commissioner is hereby authorized to charge payment of any additional filing fees required under 37 CFR 1.16, 1.17, and 1.21(h) associated with this communication or credit any overpayment to Deposit Account No. 02-4377. Two copies of this sheet are enclosed.
	Please direct all communications to:
	BAKER BOTTS LLP
	30 Rockefeller Plaza
	New York, NY 10112
	BAKER BOTTS L.L.P.
	By Ja Ja
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	PTO Registration No. 26,946
Enclosures	